

BENDER (Prosper)

To Dr. P. P. Wells

With the respectful homages
of the author,

ADDRESS

P. P. Wells

ON

HOSPITAL AND DISPENSARY CLINICS,

AND THE ART OF PRESCRIBING.

BY

DR. PROSPER BENDER,

BOSTON, MASS.

Delivered before the Hahnemannian Society, B. U. S. M., Feb. 9, 1888.



AN ADDRESS

ON

HOSPITAL AND DISPENSARY CLINICS, AND THE ART OF PRESCRIBING.¹

By Dr. PROSPER BENDER, Boston, Mass.

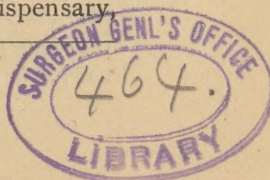
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MR. PRESIDENT, LADIES AND GENTLEMEN, — I cordially acknowledge the graceful and kindly courtesy which prompted your request that I should deliver an address to you this evening. The task I have undertaken willingly, indeed, though not without some misgivings as to my perfect competence to deal with my subject. It seems to me that some other professional gentleman of more ability might have been chosen for this interesting occasion; but of one thing you may rest assured, that I fully appreciate the honor done me, and will endeavor, with whatever measure of success, to meet your legitimate expectations.

You have generously left the choice of subject to myself. This is an advantage I candidly acknowledge. But you must be fully sensible of the difficulty of satisfying one's own taste in presence of the numerous attractive topics, each, though in a different sphere, making a powerful appeal — presenting, as the French say, *un embarras de richesses*. In view, however, of my pleasant relations with many of you at the Dispensary of the Boston University, and considering, also, the importance of clinical work in itself, I have thought it best to take this for my theme. My efforts to deal with this subject effectively will afford opportunities of describing some past experiences in relation to the selection of remedies which, had I enjoyed earlier, must have saved me much needless study, as well as unsatisfactory professional work.

Without further preamble, let me say that I have always felt honored by your presence during my services at the Dispensary.

¹ A reprint from "The New-England Medical Gazette."



which, voluntary on your part, more deeply affected our sympathies on both sides. It proved to me, that you appreciated the clinical advantages afforded you, and your quick apprehension of my observations and suggestions impressed me gratifyingly. Indeed, there is no more profitable form of practical instruction than hospital and dispensary opportunities; and allow me to remind you they are seldom available after graduation. While I admit that your training at the University must first be mainly scientific, and also that experience is only valuable when based upon sound principles; yet to fully understand and intelligently apply the rules of art therein involved, you need a subsequent practical course. If possible, you should attend the daily clinical instructions, and take written notes of the cases coming under notice, that you may compare their features and descriptions with those given in your text-books or in the systematic course by the professors of the University. This will lead to profitable reflection and a familiarization with disease, which is so often protean and puzzling in its forms.

At the clinics you behold disease in all its painful and mysterious manifestations. Its striking and often bewildering developments in various constitutions, affected and modified by abuse of remedies, the violation of the laws of health, long periods of neglect, etc.,—are abundantly manifest. You receive, thus, lessons moral as well as intellectual, of the highest value. Your physical faculties also become sharpened and quickened; eyes, nose, and ears, all being kept on the *qui vive*. No amount of lecturing, however able and lucid, can teach you to detect the crepitus of a broken bone, the peculiarities of the pulse, the cachexia of the chlorotic or cancerous patient, the hectic flush of phthisis, the gait of the hemiplegic, the fluctuation of an abscess, or the murmur of an impaired cardiac valve. These are things which your fingers must learn to feel, your eyes to see, and your ears to hear. Appeals to the sharpened senses make a quicker, more lasting impression than appeals to the judgment and reason. What you specially need to understand are the every-day cases that fall to a practitioner's lot; and most of these you will meet at the Dispensary.

In all humility, let me revert to my work at the Dispensary. I have essayed there to interpret to you the manifold signs of disease, to teach you promptly to determine the cause, course, and nature of disease, as also its morbid processes, multitudinous phases, with the appropriate treatment, medicinal, hygienic, and dietetic. In other words, I have attempted to supply you with material for thought and reflection, in order to increase your knowledge, and especially to give you such practical hints as I would have greatly valued in my student days, but

which I acquired only after much experience and sifting of the wheat from the chaff.

I hope you will bear with a few further personal remarks on this subject, particularly as they may tend to make our mutual relations still better understood. And first, if you do me the honor of attending the Dispensary during my future service thereat, it shall be my aim to be as interesting and instructive as I can, and even more useful than in the past, if in my power. It is my experience that the teacher is benefited as well as the taught. The solving of difficulties, the illustration of valuable scientific truths, and the recall of precious experience, constitute admirable mental stimulus to the teacher, while affording him that keenest of all moral pleasures, the enjoyment attending the communication of knowledge to his juniors and the honorably ambitious. How gratifying, again, is the thought that such instruction may be made of enormous value to multitudes of our suffering fellow-creatures !

Our calling, ladies and gentlemen, is a very serious one, and I cannot too strongly impress upon you its responsibilities ; but there are many privileges to set against those responsibilities. In truth, no occupation presents so many occasions for doing substantial and frequent good as ours. Speaking briefly, you will have opportunities of prolonging, with the help of Providence, valuable lives, and recalling many others from the brink of the grave ; while others, again, may be delivered from racking pains and wasting diseases, by judicious, vigilant treatment, and ample, suitable care. Such benefits conferred, such glorious results achieved, give full compensation for the drawbacks, difficulties, and hardships to which we are often exposed, including the constant uncertainty of our ability to attend any pleasant or festive gathering, or even obtain much-needed rest. There is, moreover, much enjoyment in the close observance of the marvellous phenomena of the human body, its varied, distressed, and improving conditions—its modes of living and dying. With what interest the true physician watches the disturbances of the otherwise evenly balanced condition of healthy people—the many external causes of disease, of a tangible as well as subtle character, wafted about, or permeating the air, or gaining admission through the lungs or stomach ! But the most ennobling and encouraging aspect of our profession is that connected with frequent successful struggles with the fell destroyer, and the immense gratification contingent upon the postponement, for however brief a period, of his ultimate conquest.

In our profession, as in all others, there is but one path to excellence and fame ; namely, continuous hard work. As a certain German writer says (Goethe, I believe), “ Genius is but another

name for hard work." Be diligent and persevering in the investigation of all that may help to prolong life and give ease to your fellow-beings. Till your mental ground thoroughly, plough well, and sow good seed, and you will garner a bountiful harvest. Such work will surely bring its own reward,—the gratification of knowledge attained, and the consciousness of greater power and opportunities for usefulness.

The true aim and end of medicine is to cure and lessen the sum of human ills; and I doubt not that all of you are anxiously awaiting the opportunities for the exercise of the skill you have so diligently acquired since you entered this University. The study of *materia medica* may at first prove arid and dull; but you must bring to it all your powers, determined on mastering all necessary knowledge, no less than on learning the best means of its application. We meet daily with men fully equipped for forming an accurate diagnosis and prognosis; but most of them are deplorably deficient when the treatment has to be undertaken. You not only need a good knowledge of the *materia medica* to reach the status of an able physician, but you also need a reflective, analytical mind, so as to be able to apply your learning to the cases before you. It may take years of earnest and laborious application to familiarize you with it, but its assured possession will yield you the highest gratification. With what delight you will reflect that you have repelled the assaults of the grim tyrant for a time, or relieved some poor sufferer from a world of anxiety and pain! And yet I would not assert that the *materia medica* should be "the be-all and end-all" of your attainments; for it is most important that you should be acute and successful in forming a diagnosis, skilful in recognizing etiological factors, and in determining a prognosis. I attach the greatest value to a correct diagnosis, the lack of which I have known to occasion errors in treatment, diet, etc., to lead to the prolongation and aggravation of diseases otherwise controllable, with, in too many cases, the premature loss of life. A physician must know the nature of his work, what he has to do, and the best method of procedure. The true key to success is the careful study of each of your cases, taking down minutely all the symptoms, their modalities, conditions, concomitants, etc., and then seeking for the *simillimum* to the phenomena or symptoms presented by the patient. When that is secured, be certain that a cure will follow, if the case be within the domain of remedial possibilities.

In conversation with some of you present this evening, I have noticed a disposition to practise homœopathy in the way I did in the earlier years of my professional life,—basing my prescriptions upon pathological conditions; and I now deem it

my duty to warn you against that course. Such shoals as I have grounded upon, I have known to produce no little dissatisfaction, and have even led some able men to leave our ranks. A bit of my own personal experience may illustrate my meaning. When I began the study of homœopathy, at the earnest solicitation of friends, Hughes' works had just appeared, and they seemed the very works I wanted; but I soon perceived that his recommendations often proved disappointing. At about this time, during the absence of the only homœopathic physician of the place, I was called to attend one of his patients, a child ill of broncho-pneumonia. I carefully read Hughes' works, and prescribed according to his directions, administering aconite first and then phosphorus. But my patient did not improve, when I gave bryonia and tartarus alternately. These medicines, too, failing, I became alarmed, and informed its father, a very intelligent man, that unless allowed to treat the child with blisters, etc., I would discontinue further attendance. To my astonishment he refused, adding, that if I would only study up the case properly, — that is to say, find a medicine to correspond with all the symptoms, — I would cure his child without a resort to medical barbarities. The rebuke seemed severe, and yet I saw some justice in it. I promptly returned to my office, and, after carefully consulting Jahr's Repertory, I handed the parent some ipecac with the remark that, if there were any virtue in Hahnemann's law, it must help the child, and if it did not, I should drop the case unless permitted to act as I deemed best. Now, imagine my astonishment when, next morning, I found the little patient greatly improved, and soon after she entered into full convalescence.

I need hardly say that this lesson was not lost, although I admit that even after it I sometimes lapsed into similar old-time habits. Occasionally, with the aid of Hughes, Hempel, and Laurie I made a brilliant cure, but oftener, when moving solely by these lights, failure occurred. Then, beside, I never felt certain that my prescriptions would succeed: now, however, when I have found a remedy which covers the aggregate of symptoms, I can look my patient in the face, and say, "That will help you;" or, "That will cure you," according to the nature of the case. There is comfort, there is gratification, with such conditions, which if you wish to experience, master your materia medica. Prescribe according to the totality of the symptoms, whatever the name of the disorder, and all will be well with you and your patients.

It may be wise to remember that you often impart your own confidence to the patient, thus securing the help of any virtue in mind-cure, about which so much has been said of late. Did

time permit, I might say something to you on this important subject ; for the highest authorities, of whatever school, candidly admit the intimate and mysterious connection between body and mind, the wonderful functions of the brain and nerves in all intelligent action, the closeness and efficiency of their sympathetic relations, with the mischievous action of improper remedies on this fine semi-spiritual mechanism, upon whose healthy operation the intellect and all that is most valuable in life depends. In brief, while discouraging delusion, exaggeration, and all unjustifiable hopes, I would, no matter how appropriate the medicine, enlist the aid of all the faculties calculated to cheer the mind, and encourage normal organic action. The value of healthy, pleasant mental excitement, with due encouragement, should never be overlooked by the physician ; and I enjoin you to practise it whenever possible.

Some of you have said to me at the clinics : " The great number of symptoms in some of our cases puzzle us. We search the *materia medica* for a remedy which in its pathogenesis has all the symptoms of the patient, but after hours of study we find ourselves as far off the goal as when we first began our investigation. What is one to do under such circumstances ? " I fully sympathize with you in your dilemma, for many a time I have found myself in the same predicament, and do still occasionally. With the view of assisting you I will give you the benefit of years of study, and tell you how I proceed under such conditions. In summing up a case for which I intend to prescribe, I give most prominence, first, to the etiological factor, whether it be a blow, a shock to the nervous system, or the effects of the elements ; second, to abnormal or unusual symptoms (the ordinary symptoms in the course of disease are of no importance in the consideration of a case, but the extraordinary or characteristic ones are, and they generally guide to the right remedy) ; third, the mental symptoms, depression, irritability, etc. ; and fourth, the conditions, aggravations by motions or rest, the return of pain at specified hours or periodically, etc.

Many a brilliant and prompt cure has followed the application of the first therapeutical rule. I believe I can best impress upon your memory its advantages by citing illustrative cases of each kind which I published *in extenso* some time ago. The first is that of a lady, aged sixty, who severely injured her spine in a railway accident, four years previous. She was confined to her bed for more than a year after the accident, but was able now to go about, although under difficulties, for the least movement, even the lifting of her hand to the mouth, excited pain between shoulder-blades and in the neck. Her other symptoms, briefly told, were : cold spot between scapulæ, with chills

running up and down the back ; dry, teasing cough the moment her head touched the pillow ; throbbing in the neck and ears ; stiffness in the knees and legs ; occasionally severe pains in vertex and occiput ; memory impaired ; often used the wrong word and the wrong name for objects ; diarrhœa from fatigue or excitement ; worse in the open air and better in the warm room. *Hypericum* 6 soon relieved her, and after some months she told me she felt "as good as new."

The second case is that of an Englishman, who, a year before consulting me, ruptured a blood-vessel when attempting to lift a heavy weight, since which time he has had bleeding at the lungs, almost daily, especially if he exercised in the least. Symptoms : bruised pain in lower portion of right lung, aggravated by deep breathing and cough ; blood dark and clotted. *Arnica* 200 soon helped him, and in the course of a few weeks the hæmoptysis completely disappeared.

My third and last case is one of muscular rheumatism of the left arm and hand, with loss of power and atrophy of the muscles ; frequent attacks of bilious vomiting at irregular intervals, accompanied by severe gastralgic pains, compelling the patient to "double up" and to roll about the bed, from the intensity of pain ; and severe constipation, no stool except by means of powerful purgatives. He had been under professional treatment for nearly a year, without benefit. After close questioning, I elicited the fact that his trouble was occasioned by his being out in a drenching rain, one night. *Rhus* 3 cured him after a short while.

I can recall at this moment several cases of neuralgia, bronchitis, etc., cured by *dulcamara*, when the patients had been exposed to damp air ; attacks of rheumatism from getting the feet wet, cured by *rhus*, *puls.*, etc. But again, let me beg you to remember that to promptly cure your patient, you must select a medicine which will not only cover the single symptom, but the totality of them.

As regards the second rule, the relative value of symptoms. Every deviation from the standard of health, in mind and body, manifests itself by symptoms, and the aggregate of symptoms constitutes the disease. To cure the disordered human frame, you must find a parallelism between drug symptoms and those of the patient ; but every now and then instances arise in practice when the symptoms are so numerous and conflicting that this appears a hopeless task. Perhaps, if our provings were more complete or thorough, we would find all the symptoms under one medicine to correspond with those of the patient ; but as our *materia medica* and repertories stand to-day, they often confuse and bewilder the untutored practitioner, and

for that matter, the tutored as well. In such cases, the striking or characteristic symptoms of a remedy must determine your choice, leaving out the ordinary ones in the picture of the case. Each medicine has, besides its ordinary, common symptoms, some characteristic or distinctive effect which is peculiar to it. This characteristic or generic symptom may belong to some other or even several other remedies; and when it does, these medicines are classified in one group. For instance, there is an important group of medicines which has for characteristic great chilliness and sensitiveness to cold air; viz., arsenic, china, hepar, mercurius, natrum mur., sil., etc.: and another group which has the opposite characteristic, over-active circulation, with oppression from heat, and relief in the open air, pulsatilla, lycopodium, etc. In that manner you may limit the number of remedies from which to make your selection. When you desire to differentiate between medicines belonging to one group, a study of the common symptoms assists you in the final selection.

Guernsey says, in his "Obstetrics," p. 292, "The totality of the symptoms will often be indorsed by the characteristic symptom on the side of the patient, and the corresponding 'key-note' on the side of the remedy." And this is exactly what I have repeatedly found. Many a time, owing to my failure to discover the "key-note," I have uselessly prescribed; but the moment I recognized it, a new light dawned upon me, and the results that followed were satisfactory. But you must not exaggerate the importance of this law; yet, as I have said, you will frequently find that it will prove a rational guide.

Only the other day a key-note helped me signally. All the symptoms obtained pointed to sepia, and I was about to prescribe it, when my patient said, "During the existence of that pain in the left ovary, the region is very sensitive to the least touch: even the weight of the clothes is painful." This caused me to make further inquiries, when I learned that she could not bear any thing tight about the neck (also sepia), and was always worse after sleep. I then gave lachesis 30 instead, and with the most gratifying results. I remember also succeeding in saving the life of a child which I had given over, its disease being broncho-pneumonia. After expressing my despair of saving the child, the mother remarked, in the midst of her sobs, "There is one strange feature in connection with baby's illness which I have always forgotten to mention. Every time I am putting him back in the crib he wakes up, clutches at my neck, as if fearing to fall." I immediately administered horax 60, and that child is a healthy boy to-day. I remember also a case of suppressed gout with innumerable symptoms, the principal

being a loose evacuation of the bowels every morning at five o'clock, which compelled a hurried movement to the closet. Sulphur given her in varied dilutions cured.

Another unusual symptom, for example, is the intense thirst of acetic acid in dropsy, without the presence of fever; and an equally peculiar condition belonging to the same remedy, and which illustrates Hahnemann's "alternate action of remedies," is a fever without thirst. Similarly uncommon and striking are the profuse cold sweats of *veratrum album*, while patient complains of internal heat; the burning skin covered with perspiration, of *aconite* and *opium*; the irresistible desire to kiss during the menses, of *veratrum*; the cold hands and feet while the palms and soles are burning, of *ferrum*; the dread of motion, fearing it may cause the heart to cease acting, of *digitalis*; or the apprehension that the heart will discontinue its functions unless he keeps moving about, of *gels.*; the thirst during the chill period of intermittent fever, of *ignatia*; the aggravation of pain to the slightest touch, but relieved by hard pressure, of *china*; the impulse to throw himself out of the window every time he approaches one, of *arg. nit.*;¹ and many more, which a regard for your patience forbids recalling.

As to the third rule, its value is also undoubted, as I have ascertained many a time. I was called a short time ago to a case of flooding after miscarriage. I had hardly put more than a few questions to my patient, when she interrupted me, snappishly demanding, "Why don't you give me something to help me, instead of sitting down there asking me all kinds of questions? I have no patience with such a doctor as you." There was no need of further inquiries in this case, as I was sure the other symptoms would call for *chamomilla*; but for the sake of discipline, as well as to be sure of my prescription, I continued my questions. Soon after taking the medicine the severe pains ceased, and the flow diminished. The next morning my irascible patient desired to know what new opiate I had given her which had acted so satisfactorily, and without any unpleasant after-effects. Now, to illustrate the opposite condition, I may state the case of a patient who consults you with tears in her eyes, and endeavoring to enlist your sympathies, for which *pulsatilla* is generally the specific; that of the sighing patient full of sorrow, with or without cause, which calls for *ignatia*; and that of the suicidally-inclined patient, although apparently otherwise well, which requires *aurum*, etc.

Concerning the fourth rule, the conditions of symptoms, this, too, demands careful consideration. The aggravation or amelio-

¹ Twice I have met with this symptom, and both times *arg. nit.* removed it.

ration from motion suggest bryonia and rhus, respectively ; but pray remember, that other medicines have those conditions. Then we have medicines which present both features, aggravation at one time from motion, and relief from it at another (china). The bryonia pains are generally worse during motion, but the lumbar pains of that medicine are often better from motion. Rhus is usually better from motion, but some of its lumbar pains are better during repose. The arsenic headache is sometimes relieved by cold, and sometimes by heat. The hour at which a patient experiences an exacerbation is often a prompt and excellent indication for the remedy. I soon cured a case of sciatica last winter, of six months standing, which presented a decided aggravation at 3 A. M., obliging the patient to get up and walk about for relief, with kali. carb. 12. Some of the minor symptoms made me choose that medicine in preference to arsenic, which also has that hour of aggravation of pains. Many a case of neuralgia of the supra-orbital nerve I have cured with nux, when the symptoms recurred every morning, disappearing in the afternoon. Several asthmatic cases I have relieved with arsenic when the spasms returned periodically at 2 A. M. The heat of the bed increasing suffering, or intensifying the itching of eczema, calls for pulsatilla or sulphur ; but with the former, the patient feels relieved from bathing in cold water, while with the latter, he is made worse by it. I could continue describing many more such examples, but they are all doubtless familiar to you.

It is possible that in some cases you may be called upon to follow different rules from those above mentioned. Sometimes the symptoms preceding an illness, the anamnesis, such as profuse or scanty menses before conception or the menopause, constitutional taint or idiosyncrasies, may prove the decisive symptom in the ultimate selection of the remedy. It may also be necessary to make the individuality of the patient correspond with the individuality of the remedy. For instance, calcarea carb. to leuco-phlegmatic subjects, graphites to coarse-grained, large-boned women, nux to the plethoric, sulphur to the bilio-lymphatic, ferrum to the pseudo-plethoric, etc. Again, you may have to make allowance for the rule, as also for the exceptional action of medicines. And then again it is often difficult to obtain an accurate picture of a case, where there has been abuse of remedies : it is best under those circumstances to give an antidote first, — natr. mur., if quinine has been taken ; pulsatilla, if iron ; nitric acid or hepar if mercury, etc. If a case does not respond to well-indicated remedies, give a few doses of sulphur or psorinum, and administer once more the *simillimum*.

In support of the several methods enumerated I have facts accomplished in the past and repeated in every-day practice. If you will bear them in mind, your skill as healers of the sick can but increase, and you will become true blessings to your fellows in pain and affliction.

Let me now urge upon you the great importance of obtaining a complete record of your cases, in writing. To record a case well, necessitates a good knowledge of human nature, as well as of disease and of the *materia medica*. According to the founder of our school, that is the great stumbling-block of practitioners: prescribing is comparatively easy when you have carefully noted down the symptoms. The value of keen discernment, with the power of correctly analyzing or interpreting symptoms as they are uttered by the patient, impresses itself daily upon me with increasing force. As your knowledge of *materia medica* augments, you will realize that you understand more and more clearly your patient's descriptions of his complaints. Most of you have heard me examine, question, and cross-question patients, so that I need not here repeat the method or formula. You have doubtless noticed how difficult it is at times to avoid putting direct questions, how some patients understate or exaggerate their symptoms for varied reasons, fearing in one case to be thought childish, and in the other that you will not exert yourself sufficiently in their behalf; or they may be unable to describe their feelings correctly. Here we contend with a serious source of mischief.

Patients may tell you they are worse upon motion, and still they will rise and walk about, slowly it is true (*pulsatilla*); their skin may be very cold to the touch, and yet they keep throwing off the bed-clothes (*secale*). If we desire prompt and satisfactory cures, we must be on the lookout for all such possibilities. The discerning physician will be able to detect error, and solve what to the unprofessional may seem mysterious: nothing should be considered too trifling to be overlooked, nothing unusual too insignificant to go unnoted. It is by observant habits, by the accumulation of small facts and their due consideration, that the physician becomes acute, industrious, well-informed, and sagacious.

I should also advise you to learn the temper of your patient, his moral and mental habits, that you may enlist the co-operation of other powers beside your medicines. All your faculties must be on the alert in your clinical examinations: you must watch both the objective and the subjective symptoms, their method and manner of progress. Sometimes the expression of the face, as in Bell's paralysis, the fan-like motion of the nostrils, the cyanotic lips, the tortuous, distended temporal arte-

ries, the œdema of the eyelids, will tell the story ; by the sense of hearing you will diagnose between pleurodynia and pleuritis, between an organic and inorganic cardiac souffle ; by smell you will recognize bronchiectasis, and sometimes an impending dissolution ; by touch decide between œdema and changes in the subcutaneous connective tissues (myx-œdema), etc.

I doubt not that much of the ground we have traversed this evening has been already gone over by you, with the aid of your distinguished and able professors ; but I hope the reiteration of facts, reflections, and counsels, the products of study and experience in countries wide apart, will help to permanently impress them upon your minds.

I will, before concluding, suggest to you as a means of recreation, as well as social advancement, some pursuit not directly connected with your professional studies, the chief of which, in my humble view or to my taste, stands literature, which, as Sir John Herschel once said, "places its possessor in contact with the best society of every period of history, makes him a denizen of all nations, a contemporary of all ages." And the world never before possessed such abundant, such splendid treasures of literature, — the finest products of all lands. We have a literature admirably calculated to instruct, to refine, to dissipate prejudices, and elevate and expand all intellects, — a blessing both to mind and morals we cannot sufficiently value.

I would also like you to study both or all sides in medicine, to know the reasons for your preference, and the best things our rivals or opponents can advance in defence of theirs. This discipline must widen your views, and give you strong and intelligent reasons for your final conclusions. It will also give you, from the start, a superiority to the merely one-sided practitioners, who are more numerous, proportionately, in the ranks of the old school.

I beg to thank you for your encouraging attention during the delivery of these short and imperfect notes. I hope the facts and suggestions offered may produce fruit in your minds, and help to increase your attachment to your studies and profession. Ladies and gentlemen, I wish you all success in its practice, and that your sphere of usefulness may extend from year to year, bringing you every blessing, so that when your end draws nigh you may review the past, realizing the aspiration of the poet :

"Time was when thou, a naked, new-born child,
Alone didst weep, when all around thee smiled.
So live, that, sinking to thy last long sleep,
Thou only smile, while all around thee weep."

